

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE IN ETHICS AND

COMMITTEE NAME (Must be same as on Statement of Organization)

Greene Co. Democrats Central Committee

IMPORTANT: Indicate type of committee you are reporting for: ☒ 7

- (1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate
 (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee
 (8) Support State of Candidates

CANDIDATE COMMITTEES ONLY:

Candidate Name

Political Party

Office Sought

District (if Senate or House)

Dana M. Lawton

SIGNATURE OF TREASURER (or person filing this report)

515-370-0163
515-386-4796

TELEPHONE

1/8/08
DATE SIGNED

Routine Penalties Due For Late Filed Reports Range from \$20 to \$800

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A Jan-1-2007 - 12-31-2007 REPORT FOR AN/A (1) ELECTION (2) NON-ELECTION YEAR.
(report date) Indicate one ☒ 2☐ CHECK IF AMENDMENT TO REPORT DATED _____☐ Check If this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a Notice of Dissolution is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)

\$

906.64

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see In-kind below)

944.00

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$

1850.64

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

794.20

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)

\$

1056.44

**UNPAID BILLS (From Schedule D - Attach Schedule D)

\$

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Greene Co. Democrats Central Committee

SCHEDULE

A

(Rev. 02/96)

MONETARY
RECEIPTS☐ CHECK THIS BOX IF
AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B 32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED
10/3 07	ID# CK#	David John Jefferson 2454 St 50129	Fundraiser	\$ 50.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 50
TOTAL (if last page of this schedule)				\$

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Greene County Democrats

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

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SCHEDULE A (Rev. 02/96)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED
8/25 07	ID# CK#	Lawrence Geisler 783 S. Ave Jetterson 50129	Fundraiser	\$ 10.-
	ID# CK#	Jane Alexander 502 S Vine Jetterson 50129		10.-
	ID# CK#	Marcia R. Thompson 2728 Meadow Glen Rd Ames 50014		10.-
	ID# CK#	Armon Duggan 1614 Longfellow St NW Washington DC 2011-6846		10.-
	ID# CK#	James Johnson 304 S Elm Jetterson 50129		10.- 20.-
	ID# CK#	Marcia Tinsler 502 Bell St Chardon 50050		20.-
	ID# CK#	Dennis Barnum 1901 Main St Gowrie 50543		20.-
	ID# CK#	Gerry Roberts 506 S Walnut Jetterson 50129		20.-
	ID# CK#	Chas Thompson 1475 26th Jetterson 50129		20.-
	ID# CK#	Pat Adams Box 23 Chardon 50050		25.-
SUB-TOTAL				\$ 175.-
TOTAL (if last page of this schedule)				\$

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(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 02/96)

MONETARY
RECEIPTS☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Greene Co. Democrat Central Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED
8/25 07	ID# CK#	Terry Adams 1062 130TH St Chardon 5050	Fund raiser	\$ 50 ⁻
	ID# CK#	Rachel E. Ducco 405 Howard St Ripley 50235		30 ⁻
	ID# CK#	Cash - fundraiser		182 ⁰⁰
	ID# CK#	Cash - Redeposit - change for fundraiser		100 ⁰⁰
	ID# CK#	Cash - fundraiser		35 ⁻
	ID# CK#	Janet Christianson 1143 D Ave Scranton 51462		60 ⁰⁰
	ID# CK#	Marc Rasmussen PO Box 70 Jefferson 50129		100 ⁰⁰
	ID# CK#	Mary Kuebeck 121 Main Ripley 50235		20 ⁻
	ID# CK#	Rachel Ducco 405 Howard St Ripley 50235		47 ⁰⁰
	ID# CK#	Cash - fundraiser		95 ⁻

SUB-TOTAL

769

TOTAL (if last page of this schedule)

\$ 769⁰⁰\$ 944⁰⁰

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(for Schedule A)

944⁰⁰

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

GREENE Co. Democratic Central Committee

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
3/24 07	ID# CK# 313	GREENE Co. Little League PO Box 25 Jefferson IA 50129	Sign Sponsor	\$ 50 ⁰⁰
6/28 07	ID# CK# 314	GREENE Co. Fair Assn c/o Becky Schmidt 607 W Reed Jefferson IA 50129	FAIR BIRTH	40 ⁰⁰
7/18 07	ID# CK# 315	GREENE Co. Auditor 114 N. Chestnut Jefferson IA 50129	VOTERS list	19 30
8/25 07	ID# CK# 316	Home State Bank 115 W. STATE Jefferson IA 50129	Cash-Change for Fundraiser	100 ⁰⁰
8/27 07	ID# CK# 317	Jonathan Smith 409 N. Chestnut Jefferson IA 50129	Fundraiser expense	186 ⁵¹
9/6 07	ID# CK# 318	Central IA Publishing PO Box 130 Boysen IA 50029	Fundraiser Ad	43 ⁸⁸
9/6 07	ID# CK# 319	Boysen Herald Publishing PO Box 440 Jefferson IA 50129	Fundraiser Ad	182 ⁸⁶
9/9 07	ID# CK# 320	Sherry Johnson 304 S Elm Jefferson IA 50129	Fundraiser expense	40 ⁰⁰ 11.65
9/26/07 Debit Home State Bank 115 W State Jefferson IA 50129				
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 674.30

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 56.9(3)(i).)

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

GREENE Co Democrat Central Committee

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11/10/ 2007	ID# CK# 321	Niculle FRIESS-Schilling 114 N. Wilson JEFFERSON Ia 50129	Food Reimbursement	\$ 50 ⁰⁰
12/7 2007	ID# CK# 322	ST BRIGID CHURCH 4600 Seneca Hwy 114th Churman JEFFERSON Ia 50129	Caucus - Rm Rent	50
12/7 2007	ID# CK# 323	City of Churman City Clerk Churman Ia 50050	Caucus Rm Rent	20 ⁰⁰
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL \$ 120

TOTAL (If last page of this schedule) \$ 794.20

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G Instructions and Iowa Code 56.6(3)(i).)

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